

Looking for hope in Lesotho

The Millennium Challenge Corporation is working to reduce poverty and promote economic development in a new way in Lesotho - by intervening in the country's health sector.

By Andrew Stamer

The overriding objective of the Millennium Challenge Corporation is to promote economic growth and reduce poverty in eligible countries.

One of the latest Corps of Engineers ventures with MCC has been the proposed investment to rehabilitate parts of the health sector in Lesotho, a small country located within the borders of South Africa.

"The focus of the program was initially looking at 96 different clinics and other health facilities around the country," said Joseph Zaraszcak, a project manager who works closely with MCC.

These facilities include anti-retroviral treatment clinics, blood transfusion centers, central laboratories, and a research and training center, he said.

"They (MCC) have given us the task of performing a due diligence

study on Lesotho's health sector program proposal," Zaraszcak said.

Due diligence is the research or analysis conducted on an eligible country's program proposal before a compact is negotiated with the country. In this case, Zaraszcak's team is looking at different aspects of the program that may put the program at risk once implemented.

Identifying these fatal flaws in the proposed health sector program before the program is begun greatly increases the probability for success, he said.

"The program came about largely due to an HIV/AIDS pandemic that Lesotho is facing," Zaraszcak said.

Infection rates have risen from five percent in 1993 to more than 28.9 percent in 2005 within the

most productive age bracket, which is between 15 and 49, Zaraszcak informed. There is also a high incidence of tuberculosis in the country, and the combination of HIV/AIDS and tuberculosis has created further health complications.

According to the MCC, the impact of the current health crisis on the country's labor force is expected to result in a major decline in the gross domestic product and deepen poverty, unless major interventions are undertaken. The pandemic affects the person with the disease and those who care for them because caregivers are unable to work.

The expectation is that more available treatment clinics will help people return to productive activity.

Zaraszcak had a first-hand account of the pandemic in discussions with a taxi driver in which the

man informed him that three of his 10 siblings died because of disease. "Three died because they simply said they were sick. And basically, when people in Lesotho say they are sick, it means they have HIV/AIDS, tuberculosis or something like that," Zaraszcak said.

"We have to find out if this program proposal is going to be effective in alleviating the problems that are there," he said.

The team vis-



Photo by Joseph Zaraszcak

Graham Jenkinson, a British consultant hired to conduct due diligence for work in Lesotho, visits an anti-retroviral treatment clinic, part of the Butha Buthe District Hospital, and discusses possibilities with Dr. M. N. H. Sheikh, the district medical officer, and a staff member.

ited different sites as part of the due diligence effort to make recommendations of whether to build a new facility or rehabilitate an existing one, and what type of infrastructure is or needs to be in place, such as electricity and water, to support such a facility.

This goes hand-in-hand with a water resources project that the MCC, another consultant and the Lesotho government are involved with.

It is critical that the Corps consultant, the MCC consultant, and future construction contractors work closely together and coordinate efforts because the renovated or new health facilities need to have water available for them to be operational, Zaraszczak said.

One big problem is that clinics are very small at approximately the size of a staff office (24 by 30 feet) and were not originally conceived for the functions they are now serving.

"When you walk through them, you have to literally walk with your feet together because all the people were lined up along the sides and corridors (waiting to be seen)," Zaraszczak said. There is not enough room for people in these small buildings so cross infection in the tight spaces in the case of tuberculosis is a likely outcome.

"This is one of the first MCC projects to be wholly social because of the health perspective," Zaraszczak said. Certainly, all MCC projects have somewhat of a social aspect, such as building new roads for commerce, but this is the first where the project or program itself is concentrated primarily on social components as opposed to infrastructure components.

The MCC now has to take our numbers, cost estimates, weighed risks, alternatives and other factors that were put together as part of the due diligence work and evaluate further whether these projects are economically viable, and what the returns on this investment are going to be, Zaraszczak said.

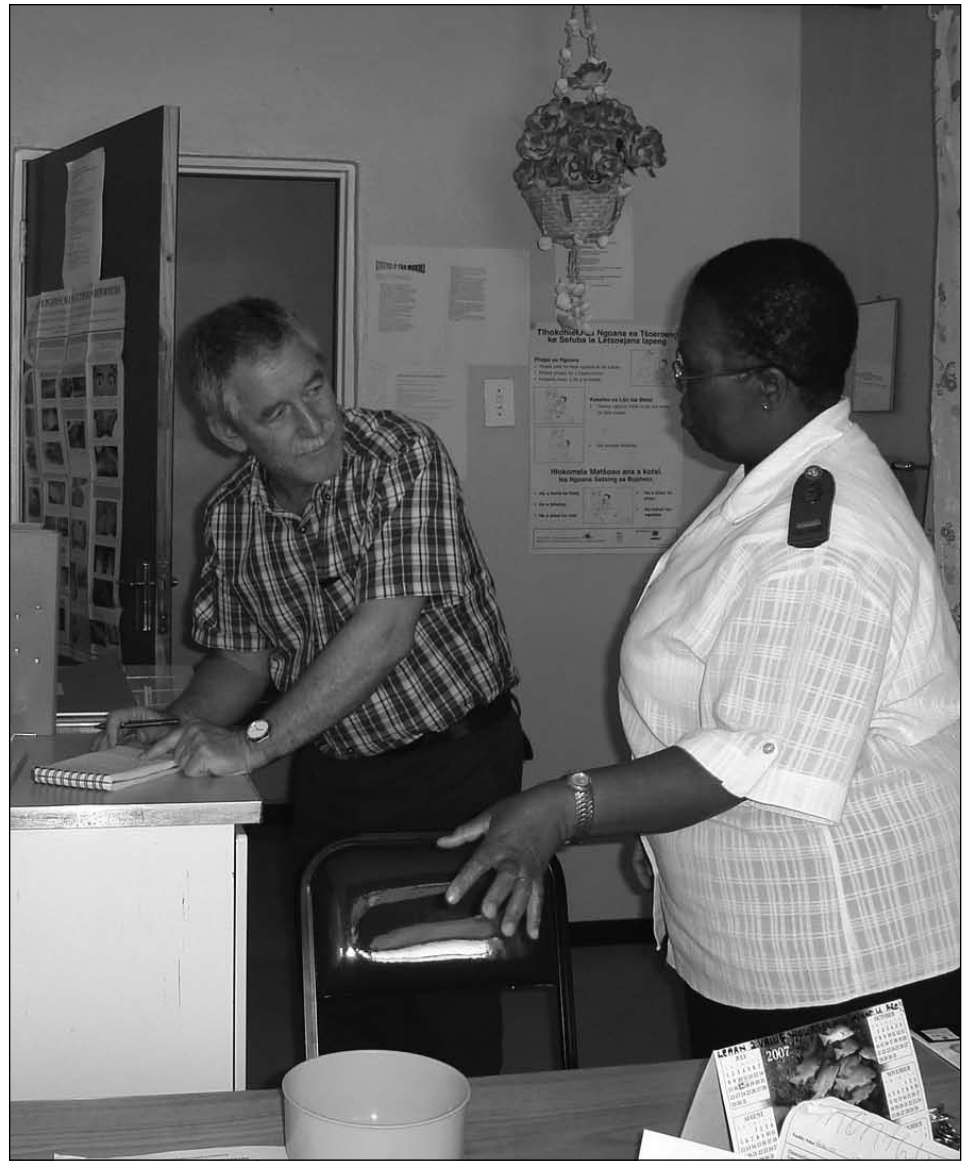


Photo by Joseph Zaraszczak

Graham Jenkinson, the technical lead for all work in Lesotho, talks with Mamoela Ntchaba, a registered nurse, as she leads the team through the facilities of the Seboche Hospital.

"It's easier to show (economic benefits) when you put in a road because it makes it possible for products to be brought to the rest of the country," Zaraszczak said. "This is something that can be measured, but to measure economic benefits in a project such as this is much less of a tangible undertaking."

This project was originally brought to the attention of a team with Pacific Ocean Division (POD) because MCC's director of infrastructure for this program had worked with them on a project in Sri Lanka, he said. TAC is also using the indefinite delivery/indefinite quantity contractor from the division's Far East District in South

Korea.

"We decided to do a team effort, where POD was initially on the project because of their relationship with the MCC director of infrastructure, and they would hand it over to us as the project progressed and we would complete the project with MCC. That's basically what we've done," Zaraszczak said.

The POD project manager, Rod Markuten, helped start the team down the right path with a kick-off meeting and operations in-country and then transferred the project to TAC with an overlap in Lesotho and final execution of the deliverables. The partnering was a success for all involved, said Zaraszczak.